## Form **990-EZ**

#### **Short Form Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

For the 2012 calendar year, or tax year beginning

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form. ► The organization may have to use a copy of this return to satisfy state reporting requirements

•		e 2012 calendar year, or tax year beginning 3/01 , 2012,	and ending	2/28		, 2013	
		applicable C change			D Em	ployer identificat	on number
=	Name ch	nange   Small Business Action Committee			4.5	-4111628	3
≓	Initial re	Independent Expenditure PAC			E Tele	phone number	
ī	Termina	30011 Ivy Glenn Drive 223			94	19 495-33	314
╗	Amende	Laguna Niguel, CA 92677			F Gro	oup Exemption	ın
	Applicat	ion pending				mber	··· <b>&gt;</b>
		nting Method X Cash Accrual Other (specify) ►				if the organiz	
	Websi	11/ 11				ittach Schedu	ıle B (Form
	Tax-exe	mpt status (check only one) $ \boxed{ 501(c)(3) }$ $\boxed{ 501(c) ( ) }$ $\boxed{ (insert no ) }$ $\boxed{ 4947(a)( ) }$	(1) or <b>X</b> 527	990,	990-EZ	, or 990-PF)	
		illy <b>not</b> more than \$50,000 A Form 990-EZ or Form 990 return is not required	though Form				
		ctions) But if the organization chooses to file a return, be sure to file a comple					
•	Add III assets	nes 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 inste	\$200,000 or ead of Form 9	more, or	if total	<b>⊳</b> \$	100 6
		Revenue, Expenses, and Changes in Net Assets or Fund Bala			tructi	•	182,60
		Check if the organization used Schedule O to respond to any question in this		uie iiis	sti uctio	ons ioi Fai	(1)
_		Contributions, gifts, grants, and similar amounts received			1	1	102 6
		Program service revenue including government fees and contracts			ŀ	2	182,6
		Membership dues and assessments			}	3	
		Investment income			ŀ	4	
	-	Gross amount from sale of assets other than inventory	5 a		į	444	
		Less cost or other basis and sales expenses	5 b				
		· .	<u> </u>			(1.1년) 5 c	
		Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Gaming and fundraising events			į.	18234	
۱ ع		Gross income from gaming (attach Schedule G if greater than \$15,000)	6 a		5		
,		Gross income from fundraising events (not including \$	of contribu	tions		i i	
		from fundraising events reported on line 1) (attach Schedule G if the sum	-	10113	l		
	Ċ	of such gross income and contributions exceeds \$15,000)	6 b			(US)	
ļ	c l	Less direct expenses from gaming and fundraising events	6 c		į.		
	d I	Net income or (loss) from gaming and fundraising events (add lines 6a and					
		5b and subtract line 6c)	_ 1		-	6 d	
-		Gross sales of inventory, less returns and allowances	7 a				
ľ		Less cost of goods sold	7 b			ŝi <b>TE</b>	
		Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)			-	7 c	
		Other revenue (describe in Schedule O)  Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8  RECE	IVED	$\neg$	L	8	
4			IVED			9	182,6
		Grants and similar amounts paid (list in Schedule O)		သွ	-	10	
.		AUG. 1	2 2013	21	-	11	
		Salaries, other compensation, and employee benefits		图 2	-	12	6,4
		Professional fees and other payments to independent contractors	NI IT	<u> </u>	-	13	43,0
		Occupancy, rent, utilities, and maintenance	الما بلا	لي	-	14	
;		Printing, publications, postage, and shipping	ee Schedu	110 0	-	15	66,0
		other expenses (describe in editedule e)	-c actient	416 O		16	55,3
4		Total expenses. Add lines 10 through 16			-	17	170,9
A		Excess or (deficit) for the year (Subtract line 17 from line 9)			F	18	11,6
SET	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (n	must agree w	ith end-o	f-year	<u>"'· '</u>	
E		figure reported on prior year's return)			_	19	
s		Other changes in net assets or fund balances (explain in Schedule O)				20	
- 1	21 1	Net assets or fund balances at end of year Combine lines 18 through 20			<b>&gt;</b>	21	11,60 <b>990-EZ</b> (2

	n <b>990-EZ</b> (2012) Small Business A				45-	-411	1628 Page <b>2</b>
Pai	Tt II Balance Sheets. (see the ins Check if the organization used Sche	tructions for Part II.)	estion in this Part II				П
	Oncok in the organization used bene	duic o to respond to any qui	estion in this r art in	(A) Beginnin	g of yea	ır	(B) End of year
22	Cash, savings, and investments					22	11,661.
23	Land and buildings					23	
24 25	Other assets (describe in Schedule O) <b>Total assets</b>			<del>-</del>		24	11 661
26	Total liabilities (describe in Schedule O)	1			0.	25	<u>11,661.</u> 0.
-	Net assets or fund balances (line 27 of		line 21)		0.	27	11,661.
Pai	t III Statement of Program Service Ac	complishments (see the inst	rs for Part III.)				Expenses
What	Check if the organization used Sci is the organization's primary exempt purpose? See	Schodulo O	juestion in this Part	111		(c)(3)	ured for section 501 and 501(c)(4)
Desc	cribe the organization's program service as sured by expenses. In a clear and concise	ccomplishments for each of a	ts three largest process provided, the nu	gram services, imber of perso	as	4947	nizations and section (a)(1) trusts, optional hers)
28	efited, and other relevant information for e		d support fo	r correral			
	For the 2012 election yea candidates and other comm		<u></u>				
	(Grants \$ ) If the	is amount includes foreign gi	rants, check here		╌┌┤	28 a	
29		<u>, , , , , , , , , , , , , , , , , , , </u>	· · ·				
					]		
	707-1-7	 is amount includes foreign gi				00 -	
30	(Grants \$ ) If the	is amount includes foreign gi	rants, check here			29 a	<del></del>
50			<del>-</del>				
				. – – – – – -			
		is amount includes foreign gi	ants, check here	<b></b>	<b>F</b>	30 a	
31							
22		is amount includes foreign gi	ants, check here		<u>*  </u>	31 a	
		3 -	·lavaaa t t i i	<del></del>			
rai	List of Officers, Directors, Check if the organization used Sci	hedule O to respond to any o	juestion in this Part	e even ir not comp IV	ensated	(see tn	e instructions for Part IV
	(a) Name and Title	(b) Average hours per week devoted to position	(c) Reportable compensa (Forms W-2/1099-MIS( (If not paid, enter -0-)	contribution benefit plans		yee	(e) Estimated amount of other compensation
	el Fox	1.					
	incipal Offcr mes Lacy	1		0.		0.	0.
	easurer	1	2,72	0.		0.	0.
Bar	rett Garcia						
Ass	st Treasurer	1	3,68	9.		0.	0.
		·· · - · ·					
				-			
		-					
	<del></del>						
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	- <u></u> _						
BAA	<del> </del>	TEEA0812L 0	3/14/13	•			Form <b>990-EZ</b> (2012)

rai	ty Utner Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			- 1 1
	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,'		Yes	No
	provide a detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect			
25 -	a change to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities	34		X
39 a	(such as those reported on lines 2, 6a, and 7a, among others)?	35 a		
b	If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35 b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	25.		<b></b>
36	Did the organization undergo a liquidation, dissolution, termination, or significant	35 c		X
-	disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions   37a N/A		:	
	Did the organization file Form 1120-POL for this year?	37 b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a		X
b	If 'Yes,' complete Schedule L, Part II and enter the total	N Y N	. 4 . 8	A
30	amount involved Section 501(c)(7) organizations Enter		1 32	ž ž
	Initiation fees and capital contributions included on line 9  N/A		1	3
	Gross receipts, included on line 9, for public use of club facilities  39b  N/A		2 A	
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under		, <u>, , , , , , , , , , , , , , , , , , </u>	* 1
	section 4911 ► N/A, section 4912 ► N/A, section 4955 ► N/A			*
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported.	<u> </u>	<u>هگ</u>	لخفما
	on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L. Part I	40 b		
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization	* 3	)	
	managers or disqualified persons during the year under sections 4912, 4955, and 4958  Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed	** *		`
u	by the organization • 0.			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax	<u>                                    </u>		37
41	shelter transaction? If 'Yes,' complete Form 8886-T List the states with which a copy of this return is filed None	40 e	-	X
42 a	List the states with which a copy of this return is filed ► None  The organization's books are in care of ► Barrett Garcia  Located at ► 32302 Camino Capistrano #214 San Juan Capistrano CA  ZIP + 4 ► 92675  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	96-6 42b	363_ Yes	No X
42 a	List the states with which a copy of this return is filed None  The organization's books are in care of Barrett Garcia  Located at 32302 Camino Capistrano #214 San Juan Capistrano CA  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a	96-6 42b	Yes	No X
42 a	List the states with which a copy of this return is filed ► None  The organization's books are in care of ► Barrett Garcia  Located at ► 32302 Camino Capistrano #214 San Juan Capistrano CA  ZIP + 4 ► 92675  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	96-6 42b	Yes	No X
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42 a b c c	The organization's books are in care of Barrett Garcia Telephone no 949 4 Located at 32302 Camino Capistrano #214 San Juan Capistrano CA ZIP + 4 92675  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country   See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U S?  If 'Yes,' enter the name of the foreign country   Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	96-6 42b	Yes	No X
42 a b c	The organization's books are in care of Parrett Garcia Telephone no P949 4  Located at P32302 Camino Capistrano #214 San Juan Capistrano CA ZIP+4 P92675  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country P  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U S?  If 'Yes,' enter the name of the foreign country P  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	96-6 42b	Yes	No X  A Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
42 a b c	The organization's books are in care of   Barrett Garcia  Telephone no  949 4  Located at  32302 Camino Capistrano #214 San Juan Capistrano CA  ZIP+4  92675  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country   See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U S?  If 'Yes,' enter the name of the foreign country   Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed	96-6 42b 42c	Yes	No X  X  N/A  N/A  No  X
42 a b c c 43	The organization's books are in care of   Barrett Garcia  Telephone no  949 4  Located at  32302 Camino Capistrano #214 San Juan Capistrano CA  ZIP + 4  92675  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country   See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U S ?  If 'Yes,' enter the name of the foreign country   Section 4947(a)(1) nonexempt charitable trusts filling Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	96-6 42b 42c 42c	Yes	No X  X  N/A  N/A  No  X
42 a b c c	The organization's books are in care of Barrett Garcia  Cocated at 32302 Camino Capistrano #214 San Juan Capistrano CA ZIP+4 92675  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country   See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If 'Yes,' enter the name of the foreign country   Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year? If 'Yes,' to line 44c, has the organization filed a Form 720 to report these payments?	96-6 42b 42c	Yes	No X  X  N/A  N/A  No  X
42 a b c c d	The organization's books are in care of Barrett Garcia  Coadiat 32302 Camino Capistrano #214 San Juan Capistrano CA  Telephone no 949 4  Located at 32302 Camino Capistrano #214 San Juan Capistrano CA  Telephone no 949 4  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If 'Yes,' enter the name of the foreign country form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	96-6 42b 42c 42c	Yes	No X  X  N/A  N/A  N/A  N/A  X  X  X
42 a b c c d 45 a	The organization's books are in care of Barrett Garcia  Telephone no 949 4  Located at 32302 Camino Capistrano #214 San Juan Capistrano CA ZIP + 4 92675  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account, or other financial account; securities account, or other financial account; If 'Yes,' enter the name of the foreign country   See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U S?  If 'Yes,' enter the name of the foreign country   Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Page 13  Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year?  If 'Yes,' to line 44c, has the organization filed a Form 720 to report these payments?  If 'Yes,' provide an explanation in Schedule O  Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?	96-6 42b 42c 42c 44a 44b 44c 44d 45a	Yes	No X  X  N/A  N/A  N/A  X  X  X
42 a b c c d 45 a	The organization's books are in care of Barrett Garcia  Coadiat 32302 Camino Capistrano #214 San Juan Capistrano CA  Telephone no 949 4  Located at 32302 Camino Capistrano #214 San Juan Capistrano CA  Telephone no 949 4  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If 'Yes,' enter the name of the foreign country form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	96-6 42b 42c 42c	Yes	No X  X  N/A  N/A  N/A  N/A  X  X  X

						Yes	No
	he organization engage, directly or indire idates for public office? If 'Yes,' complete		ign activities on behalf o	of or in opposition to	46	X	
Part VI	Section 501(c)(3) organizations	<del></del>	•		170	ΙΛ.	L
. art vi	All section 501(c)(3) organization		uestions 47-49b an	d 52, and complete	e the table	es	
	for lines 50 and 51.	•		•			
	Check if the organization used Schedul	le O to respond to any	question in this Part VI	····		_	$\Box$
47 Did th	ne organization engage in lobbying activities	or have a section 501/h	) election in effect during t	the tay year? If 'Yes '		Yes	No
	plete Schedule C, Part II	or have a section sorting	, cleation in effect during	ine tax year in res,	47		
<b>48</b> Is the	e organization a school as described in se	ection 170(b)(1)(A)(ii)?	If 'Yes,' complete Sche	dule E	48		
	he organization make any transfers to an	•	e related organization?		49 a		
	es,' was the related organization a section	•	was (ather then officers	directors trustees and k	49 b	L	
	plete this table for the organization's five high pyees) who each received more than \$100,0				Су		
	(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W 2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimate other com		
	<b></b>						
f Total	number of other employees paid over \$1	100 000	<u></u>				
<b>51</b> Comp	olete this table for the organization's five high	hest compensated indep	endent contractors who ea	ach received more than \$	100,000 of		
	pensation from the organization. If there is				1		
(a) l	Name and address of each independent contractor paid	more than \$100,000	<b>(b)</b> Type	of service	(c) Comp	ensatio	n 
		- <b></b>	1		1		
<b>d</b> Total	number of other independent contractors	s each receiving over \$	5100,000	-			
<b>52</b> Did t	he organization complete Schedule A? <b>N</b>	ote: All section 501(c)	•	► 47(a)(1) nonexempt			
52 Did to chari	he organization complete Schedule A? <b>N</b> table trusts must attach a completed Sch	ote: All section 501(c)	(3) organizations and 49		► Yes	· [	
52 Did to chari	he organization complete Schedule A? <b>N</b>	ote: All section 501(c)(edule A	(3) organizations and 49	e best of my knowledge and be		s [	
52 Did to chari	he organization complete Schedule A? Natable trusts must attach a completed Sches of perjury, I declare that I have examined this return	ote: All section 501(c)(edule A	(3) organizations and 49	e best of my knowledge and be		<b></b>	
52 Did to chari	he organization complete Schedule A? Natable trusts must attach a completed Sches of perjury, I declare that I have examined this return	ote: All section 501(c)(edule A	(3) organizations and 49	e best of my knowledge and be		<b>s</b> [	No No
52 Did to chari	he organization complete Schedule A? <b>N</b> table trusts must attach a completed Sch	ote: All section 501(c)(edule A	(3) organizations and 49	e best of my knowledge and beledge Date		; [	No
52 Did ti chari Under penaltitue, correct. a Sign Here	the organization complete Schedule A? Notable trusts must attach a completed Sches of perjury. I declare that I have examined this return and complete. Declaration of preparer (other than office)  Signature of officer  Type or print name and title  Print/Type preparer's name	ote: All section 501(c) ledule A , including accompanying scheer) is based on all information	(3) organizations and 49 edules and statements, and to the of which preparer has any known	e best of my knowledge and beledge  Date  Check X if	elief, it is		No
52 Did ti chari Under penaltit true, correct, a Sign Here	the organization complete Schedule A? Notable trusts must attach a completed Sches of perjury. I declare that I have examined this return and complete. Declaration of preparer (other than office)  Signature of officer  Type or print name and title	ote: All section 501(c) ledule A including accompanying scheer) is based on all information  Preparer's signature	(3) organizations and 49 edules and statements, and to the of which preparer has any known	e best of my knowledge and beledge  Date  Check X if	elief, it is		No No
52 Did ti chari Under penaltitue, correct. a Sign Here	the organization complete Schedule A? Notable trusts must attach a completed Schedule As of perjury. I declare that I have examined this return and complete. Declaration of preparer (other than office)  Signature of officer  Signature of officer  Print/Type or print name and title  Print/Type preparer's name  Barrett Garcia	ote: All section 501(c) ledule A including accompanying scheet) is based on all information  Preparer's signature & Company	dules and statements, and to the of which preparer has any known Date	e best of my knowledge and beledge  Date  Check X if	elief, it is	4	
52 Did ti chari Under penaltie true, correct. 2 Sign Here Paid Preparer Use Only	he organization complete Schedule A? Notable trusts must attach a completed Sches of perjury. I declare that I have examined this return and complete. Declaration of preparer (other than officer)  Signature of officer  Print/Type or print name and title  Print/Type preparer's name  Barrett Garcia  Firm's name   Barrett Garcia  Firm's address   32302 Camino Ca  San Juan Capist	Preparer's signature  & Company pistrano, CA 92675	idules and statements, and to the of which preparer has any known Date  Date  214	e best of my knowledge and beledge  Date  Check X if self-employed F	PTIN P0019922 33-0935	4 5931 6363	
52 Did ti chari Under penaltic true, correct. 2 Sign Here Paid Preparer Use Only	he organization complete Schedule A? Notable trusts must attach a completed Sches of perjury. I declare that I have examined this return and complete. Declaration of preparer (other than officer)  Signature of officer  Type or print name and title  Print/Type preparer's name  Barrett Garcia  Firm's name   Barrett Garcia  Firm's address   32302 Camino Ca	Preparer's signature  & Company pistrano, CA 92675	idules and statements, and to the of which preparer has any known Date  Date  214	e best of my knowledge and beledge  Date  Check	PTIN P0019922	5931 6363	No

Form 990-EZ (2012) Small Business Action Committee

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45-4111628

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

See separate instructions.

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public .

Schedule C (Form 990 or 990-EZ) 2012

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• Section 501(c)(4) (5) or (6) organizations. Complete Part III

_		rganizations completes art in			
Name	e of organization			Employer identifi	cation number
	<u>all Business Action</u>			45-41116	
Pa	it I A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organ	ization.
1	Provide a description of the	organization's direct and indirect political o	campaign activities in	Part IV Se	e Part IV
2	Political expenditures			▶,	\$ <u>120,088.</u>
	Volunteer hours				
	***************************************	rganization is exempt under secti			
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶,	\$
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955	▶,	\$
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4	a Was a correction made?				∏Yes ∏No
1	b If 'Yes,' describe in Part IV				
Pa	rt I-C Complete if the o	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3)	).
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities -	\$
2	Enter the amount of the filing of	organization's funds contributed to other organ	nizations for section 52	7 exempt	
	function activities	, ,		<b>.</b>	\$
3		ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	_	
	line 17b			►,	\$
4	Did the filing organization file	e Form 1120-POL for this year?			∐Yes ∐No
5	Enter the names, addresses	and employer identification number (EIN) s. For each organization listed, enter the ai	of all section 527 pol	itical organizations to	which the filing
	amount of political contribution	ns received that were promptly and directly del	livered to a separate po	olitical organization, such	h as a separate
	segregated fund or a politica	al action committee (PAC) If additional spa	ace is needed, provide	e information in Part I\	<b>/</b>
	(a) Name	(b) Address	(c) EiN	(d) Amount paid from filing	(e) Amount of political
				organization's funds If none, enter 0	contributions received and promptly and directly delivered to a separate
				·	political organization If
	_				none, enter -0-
(1)		<b></b>			
(2)					
(3)		<del></del>			
<i>(A</i> )	<del>.</del>			<del></del> -	
(4)					
(5)					
<del></del>	<del></del>			_	
(6)		<b></b>			

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2012	Small	Business	<u>Action</u>	Committee
0.1 . 1 . 0 . 000 . 000				

45-4111628

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section 501	(n <i>))</i> .				
A Check ► ☐ if the filir	ng organization belo	ngs to an affiliated group (and	I list in Part IV each aff	iliated group member's nam	е.
		nd share of excess lobbying		atoa g.oapobor o nam	0,
<del></del>	·	ecked box A and 'limited co		J	
	Limits on Lobb	ying Expenditures eans amounts paid or incu		(a) Filing organization's totals	(b) Affiliated group totals
· · · · · · · · · · · · · · · · · · ·		·			
·		ublic opinion (grass roots le	, ,,		
		legislative body (direct lobi	oying)		
c Total lobbying expendit		and ru)			
d Other exempt purpose	•	unos 10 and 1d\			
e Total exempt purpose e	expenditures (add i	ines ic and ru)		-	
f Lobbying nontaxable ar both columns	nount Enter the a	mount from the following ta	ble in		
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable	amount is	****	} ,
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000	· · · · · · · · · · · · · · · · · · ·	» ·
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000	2 8	
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000		^^^ ^
Over \$17,000,000		\$1,000,000.			
<b>g</b> Grassroots nontaxable	•	•			
<b>h</b> Subtract line 1g from lii		·			
i Subtract line 1f from lin	ie 1c If zero or les	s, enter -0-			
j If there is an amount othe section 4911 tax for this		er line 1h or line 1i, did the or	ganızatıon file Form 472	20 reporting	☐Yes ☐ No
(Som	colum	4-Year Averaging Period at made a section 501(h) ens below. See the instruction	lection do not have to ons for lines 2a throu	complete all of the five ugh 2f.)	
(Som	colum	at made a section 501(h) e	lection do not have to ons for lines 2a throu	complete all of the five ugh 2f.)	
Calendar year (or fiscal year beginning in)	colum	at made a section 501(h) e ns below. See the instruct	lection do not have to ons for lines 2a throu	complete all of the five ugh 2f.)	(e) Total
Calendar year (or fiscal	colum	at made a section 501(h) e ns below. See the instructi bying Expenditures During	lection do not have to ons for lines 2a throu 4-Year Averaging Pe	o complete all of the five ugh 2f.)	
Calendar year (or fiscal year beginning in)  2 a Lobbying non-taxable amount	colum	at made a section 501(h) e ns below. See the instructi bying Expenditures During	lection do not have to ons for lines 2a throu 4-Year Averaging Pe	o complete all of the five ugh 2f.)	
Calendar year (or fiscal year beginning in)  2 a Lobbying non-taxable	colum	at made a section 501(h) e ns below. See the instruction bying Expenditures During (b) 2010	dection do not have to ons for lines 2a throu 4-Year Averaging Pe (c) 2011	complete all of the five ugh 2f.)  criod  (d) 2012	
Calendar year (or fiscal year beginning in)  2 a Lobbying non-taxable amount  b Lobbying ceiling amount (150% of line	(a) 2009	at made a section 501(h) ens below. See the instruction bying Expenditures During (b) 2010	dection do not have to ons for lines 2a throu 4-Year Averaging Pe (c) 2011	complete all of the five ugh 2f.) eriod  (d) 2012	
Calendar year (or fiscal year beginning in)  2 a Lobbying non-taxable amount  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying	(a) 2009	at made a section 501(h) ens below. See the instruction bying Expenditures During (b) 2010	dection do not have to ons for lines 2a throu 4-Year Averaging Pe (c) 2011	complete all of the five ugh 2f.) eriod  (d) 2012	
Calendar year (or fiscal year beginning in)  2 a Lobbying non-taxable amount  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable	(a) 2009	at made a section 501(h) ens below. See the instruction bying Expenditures During (b) 2010	dection do not have to ons for lines 2a throu 4-Year Averaging Pe (c) 2011	complete all of the five ugh 2f.) eriod  (d) 2012	
Calendar year (or fiscal year beginning in)  2 a Lobbying non-taxable amount  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable amount  e Grassroots ceiling amount (150% of line	(a) 2009	at made a section 501(h) ens below. See the instruction bying Expenditures During  (b) 2010	dection do not have to ons for lines 2a through 4-Year Averaging Per (c) 2011	complete all of the five ugh 2f.)  eriod  (d) 2012	

(b)

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Fig. 184 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7 1	(0)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers?		× .	* -
			4
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			*
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1ı	*	<u>,                                     </u>	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			· *
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912			
$oldsymbol{c}$ If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		[	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			. , , , ,
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	(c)(5)	, or	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Fanswered 'Yes.'	(c)(5) Part II	, or s I-A, I	ection 501(c) ine 3, is
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		* '.	
a Current year		2 a	
<b>b</b> Carryover from last year	ı	2 b	
c Total		2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
			<del></del>
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?			
5 Taxable amount of lobbying and political expenditures (see instructions)	ŀ	5	
Part IV   Supplemental Information			
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Pa Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information  Part I-A, Line 1 - Direct and Indirect Political Campaign Activities	art II-A	(affilia	ated group list),
Supported several candidates and other committees			
	- <b>-</b>		

#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

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Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization Small Business Action Committee	Employer identification number
Independent Expenditure PAC	45-4111628
Form 990-EZ, Part III - Organization's Primary Exempt Purpose	
Support various candidates and other committees through the ele	ction process
<del></del>	
<del></del>	
<del></del>	
<del></del>	
<del></del>	
<b>-</b>	
<del>-</del>	
<del></del>	
<del></del>	
<del></del>	
<del></del>	

2012	Schedule O - Supplemental Information  Small Business Action Committee Independent Expenditure PAC	on	Page 2
Form 990-EZ, Par Other Expenses	t I, Line 16		
Bank fees Contributions Web site expen	made ses	\$ Total \$	144. 54,000. 1,225. 55,369.